



Related Medlearn Matters Article #: SE0539

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Mass Adjustment of Certain Transplant Claims

Key Words

SE0539, Transplant Claims, Transplant, IPPS

Provider Types Affected

Hospitals that submitted claims for certain transplants paid under the Inpatient Prospective Payment System (IPPS) by Medicare Fiscal Intermediaries (FIs)

Key Points

- Certain transplant claims paid under the IPPS by Medicare FIs may have been processed incorrectly and overpaid.
- Acquisition charges related to heart, liver, intestine, lung, and pancreas transplants (diagnosis-related groups (DRGs) 103, 480, 495 and 513) were being passed with all other charges on the claim to the IPPS PRICER and were, therefore, used in calculating the outlier.
- Acquisition charges are considered pass-throughs and should not be included in the outlier calculation.
- Medicare FIs must adjust claims with discharge dates on or after August 8, 2003, containing DRGs 103, 480, 495, or 513 that were paid an outlier. This is an automatic adjustment; no provider action is needed.
- Medicare must complete these mass adjustments by December 31, 2005.

Important Links

SE0539, "Mass Adjustment of Certain Transplant Claims," can be found at <http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/SE0539.pdf> on the CMS web site.

Medicare Claims Processing Manual, Chapter 3 (Inpatient Hospital Billing, Section 90), can be found at http://www.cms.hhs.gov/manuals/104_claims/clm104c03.pdf on the CMS web site.